

| ORDER FOR SUPPLIES OR SERVICES <i>(Contractor must submit four copies of invoice.)</i> | | | | | | Form Approved OMB No. 0704-0187 Expires Jun 30, 1997 | PAGE 1 OF 4 |
|--|-------------------------|---|----------------------|---|---------------------|---|--------------------|
| Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302 and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503. | | | | | | | |
| PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES. SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6. | | | | | | | |
| 1. CONTRACT/PURCH ORDER NO. N00383-02-G-003H | | 2. DELIVERY ORDER NO. UBK2 | | 3. DATE OF ORDER (YYMMDD) 2004 JAN 26 | | 4. REQUISITION/PURCH REQUEST NO. YPC03346000005 | |
| 5. PRIORITY DOA1 | | 6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAD (614)692-1407 / FAX: (614)692-6292 E-mail: Michael.Theado@dla.mil | | 7. ADMINISTERED BY (If other than 6) DCMC SANTA ANA 34 CIVIC CENTER PLAZA ROOM 813A SANTA ANA, CA 92701-4056 | | 8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i> | |
| 9. CONTRACTOR PARKER HANNIFIN CUSTOMER SUPPORT INC. 14300 ALTON PARKWAY IRVINE CA 92618-1814 Vendor's Copy was sent EDI. Do not Duplicate shipment. | | 10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 120 DAYS ADO | | 11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED | | | |
| 12. DISCOUNT TERMS NET 30 days | | 13. MAIL INVOICES TO See Block 15 | | 14. SHIP TO See Schedule - Do Not Ship to Address in Block 6 | | | |
| 15. PAYMENT WILL BE MADE BY HQ0339 HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T | | 16. DELIVERY <input checked="" type="checkbox"/> PURCHASE This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your offer dated 2004 JAN 09, M2003129296 and furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. | | 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE CG: 97X4930 SCC0 001 26.0 S33150 | | | |
| 18. ITEM NO. | | 19. SCHEDULE OF SUPPLIES/SERVICE | | 20. QUANTITY ORDERED/ACCEPTED* | | 21. UNIT | |
| | | Remarks: CONFIRMING ORDER – DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT. | | TOTAL: | | | |
| | | | | 3 | | | |
| 24. UNITED STATES OF AMERICA | | BY: <i>Mary Jarman</i> | | 25. TOTAL \$ 500.01 | | | |
| 26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED | | 27. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 28. D.O. VOUCHER NO. | | 29. DIFFERENCE | |
| DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ | | 31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 32. PAID BY | | 30. INITIALS | |
| 36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____ | | 33. AMOUNT VERIFIED CORRECT FOR | | 34. CHECK NUMBER | | 35. BILL OF LADING NO. | |
| 37. RECEIVED AT | 38. RECEIVED BY (Print) | 39. DATE RECEIVED (YYMMDD) | 40. TOTAL CONTAINERS | 41. S/R ACCOUNT NUMBER | 42. S/R VOUCHER NO. | | |

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Manufacture Facilities:
3H889

PARKER HANNIFIN CORPORATION
DIV AIR & FUEL DIVISION
16666 VON KARMAN AVENUE
IRVINE CA 92606-4917

Supplies and Packaging - Inspection and Acceptance Address:
3H889

PARKER HANNIFIN CORPORATION
DIV AIR & FUEL DIVISION
16666 VON KARMAN AVENUE
IRVINE CA 92606-4917

All Terms and Conditions apply as agreed in the Basic Ordering Agreement
N0038302G003H effective 1/16/2003 through 01/15/2006.

COC is Authorized per FAR 52.246-15.

Thank you for helping us serve our Military Customer .Mary Tatman, AAB6

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SECTION B

PR YPC03346000005

NSN 4310-01-115-7376

ITEM DESCRIPTION:

PISTON RING

PARKER HANNIFIN CORPORATION

(92003) P/N 2783739-101

| <u>ITEM</u> | <u>PR</u> | <u>PRLI</u> | <u>QUANTITY</u> | <u>UNIT</u> | <u>UNIT PRICE</u> | <u>AMOUNT</u> |
|-------------|----------------|-------------|-----------------|-------------|-------------------|---------------|
| 2001 | YPC03346000005 | 0001 | 3 | EA | \$166.67000 | \$500.01 |

QTY VARIANCE: PLUS 0% MINUS 0%

INSPECTION POINT: ORIGIN

ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999

QUP = 001: PRES MTHD = 31: CLNG/DRY = 1: PRESV MAT = 00:

WRAP MAT = GH: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:

UNIT CONT = D4: OPI = 0:

INTRMDTE CONT = E5: INTRMDTE CONT QTY = AAA:

PACK CODE = Q: PACKING LEVEL = B:

MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.

SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.

PALLETIZATION SHALL BE IN ACCORDANCE WITH DC1636P001 REV E

DATED 3029

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH
MIL-STD-129 (LATEST REVISION) MARKING AND BAR
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: ORIGIN BY: 2004 MAY 25

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SECTION B

PARCEL POST ADDRESS:

FMS REQ'T

CONTACT TRANS OFFICE AT ADMIN OFF PRIOR TO SHIPMENT

M/F: (TCN) PATP5433430037 XXX

RDD 353 CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT

PROJ TP 2

SUP ADD DA2REU SIG L

FOR GOVERNMENT USE ONLY: IPD 06

DIC A01 DIST F9C ADV 2B FC 48

REMIT PAYMENT TO:
